PTO/SB/17 (01-06) Approved for use through 07/31/2006. OMB 0651-0032

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FEE TRANSMITTAL For FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

| CFR 1.27 | |
|----------|--|
| 560.00 | |

| Complete if Known | | | | |
|----------------------|---------------------|--|--|--|
| Application Number | 10/602,811 | | | |
| Filing Date | 06/24/2003 | | | |
| First Named Inventor | BOLAND . | | | |
| Examiner Name | MAYES, Dionne Walls | | | |
| Art Unit | 1731 | | | |
| Attorney Docket No. | 2442.001 | | | |

| METHOD OF PAYMEN | IT (check al | I that apply) | | | | | |
|--|---|--------------------------|--|------------------------|------------------------|-------------------|--------------------------|
| METHOD OF PATMEN | TI (CHECK AI | rulat apply) | | | | | |
| Check ✓ Credit | Card | Money Order | None | Other (| please identify) | : | |
| Deposit Account | Deposit Accour | nt Number: | | Deposit A | ccount Name:_ | | |
| For the above-ident | tified deposit | account, the Direct | tor is hereb | y authorized to | : (check all th | at apply) | |
| Charge fee(s | Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | ept for the filing fee | | |
| Charge any | additional fee | e(s) or underpayme | ents of fee(s |) Credi | t any overpay | ments | |
| under 37 CF WARNING: Information on th | R 1 16 and 1 | 17 | | ш = | | | ovide credit card |
| information and authorization | | | | | | | |
| FEE CALCULATION (A | All the fees | below are due | upon filin | g or may be | subject to | a surcharge.) | |
| 1. BASIC FILING, SEA | RCH, AND | EXAMINATION | FEES | | | | |
| | FILING | FEES Small Entity | SEARC | H FEES Small Entity | | TION FEES | |
| Application Type | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fee (\$) | Fees Paid (\$) |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| 2. EXCESS CLAIM FE | ES | | | | | Fee (\$) | Small Entity |
| <u>Fee Description</u> Each claim over 20 (| including F | Peissues) | | | | 50 | <u>Fee (\$)</u> 25 |
| Each independent cl | | | ues) | | | 200 | 100 |
| Multiple dependent | | (| / | | | 360 | 180 |
| Total Claims | Extra Clair | ms Fee (\$) | <u>Fee P</u> | aid (\$) | | Multiple Dep | endent Claims |
| 20 or HP = | | _ x | _= | | | <u>Fee (\$)</u> | Fee Paid (\$) |
| HP = highest number of tota Indep. Claims | al claims paid f Extra Clair | | | aid (\$) | | | |
| - 3 or HP = | Extra Olai | | _= | 147 | | | |
| HP = highest number of inde | • | s paid for, if greater t | han 3. | ., | | | |
| 3. APPLICATION SIZE If the specification and | FEE | avaged 100 shee | te of nane | r (evoludina i | electronicali | v filed sequen | ce or computer |
| listings under 37 C | u urawings ER 1 52(e) | the application | ns or pape. n size fee o | lue is \$250 (| \$125 for sma | all entity) for e | each additional 50 |
| sheets or fraction t | | | | | | ,) | |
| <u>Total Sheets</u> - 100 = | Extra She | <u>ets</u> <u>Numb</u> | <u>er of each a</u> | additional 50 o | or fraction th | | \$) <u>Fee Paid (\$)</u> |
| | | /50 | ······································ | lound up to a | WHOLE HUITIDE | · | |
| 4. OTHER FEE(S) Non-English Specif | ication, \$ | 130 fee (no sma | ll entity di | scount) | | | Fees Paid (\$) |
| Other (e.g., late filir | Other (e.g., late filing surcharge): Request for Continued Examination and One Month Extension 560.00 | | | | 560.00 | | |

| SUBMITTED BY | | | |
|-------------------|-------------------|--|--------------------------|
| Signature | Bul | Registration No. (Attorney/Agent) 30,398 | Telephone (843) 577-7700 |
| Name (Print/Type) | B. Craig Killough | | Date 05/5/2006 |

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.